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SMALLBURGH
RURAL DISTRICT COUNCIL.



ANNUAL REPORT

of the

Medical Officer of Health
including the report of the
Senior Public Health Inspector

for the

Year 1956

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RURAL DISTRICT COUNCIL.



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MEMBERS OF THE HEALTH COMMITTEE.

1956 — 1957.

Chairman: Councillor B. W. T. AMIES.

Vice-Chairman: Councillor G. E. MILLIGEN, M.A.

Councillor A. M. Allan.

„ J. S. Bain.

„ R. O. Brooks.

„ C. N. Beck

„ C. R. Chamberlin.

„ J. Durrell.

„ Major A. C. Holden, T.D., J.P.

(Chairman of the Council)

„ J. J. A. Kendall, T. D.

„ A. E. May.

„ J. Middleton, M.B.E. *(Vice-Chairman of the Council)*

„ Hon. Mrs. S. C. Peel.

„ J. Skinner.

„ C. T. Stannard.

„ W. T. P. Steele.

„ B. J. Wall.

HEALTH DEPARTMENT.

1956.

Medical Officer of Health.

G. R. HOLTBY, M.D., B.S., D.P.H., D.I.H.

Surveyor and Senior Public Health Inspector.

Norman F. Cripps, F.A.L.P.A., M.R.S.H., A.I. Hsg., Cert. S.I.B.

Additional Public Health Inspector.

A. E. Ford, Cert. R.S.I.

SMALLBURGH RURAL DISTRICT COUNCIL.

*Council Offices,
Stalham.
Norwich.*

*To the Chairman and Members of the
Smallburgh Rural District Council.*

Ladies and Gentlemen,

I have the honour to present the Annual Report for the year 1956. This is the 9th Report to be presented since the coming into force of the National Health Service Act, 1946.

The Registrar-General estimated the mid-year population as 17,980 compared with 18,120 in 1955. There were 207 live births and 173 deaths, giving a natural increase of 34. The crude birth rate is 11.51 per thousand of the population, and the crude death rate 9.62 per thousand of the population. By use of the comparability factor supplied by the Registrar-General the birth rate becomes 13.35 and the death rate 8.65. The purpose of this factor is to modify local rates to those of a population with an age and sex distribution of England and Wales as a whole. The standard rates in England and Wales are Birth Rate 15.6 and Death Rate 11.7.

The principal causes of death were cardio-vascular disease and cancer in all forms which represent 57.2% and 13.3% of all deaths respectively. The general attitude to cancer and perhaps also to cardio-vascular disease is in danger of becoming one of helpless resignation in face of the apparent inevitability of the diseases. This is a false idea as recent years have seen much increase in interest and some growth in our knowledge of cardio-vascular disease, particularly coronary thrombosis. It has been shown that this disease is much commoner in countries where the standard of living is high and it appears to be related to the taking of a rich diet, together with a too sedentary form of life. In the case of cancer, not only can many cases be successfully treated if the diagnosis is made early, but the history of the disease or diseases which are collectively spoken of as cancer shows that several of them have already been eliminated by preventive measures.

Such are forms of cancer of the skin which used to attack the chimney sweeps who formerly ascended the chimneys of houses

instead of inserting brushes up them, and one which attacked certain operatives who came into close contact with the oil of machines in cotton mills. Cancer of the lip is much less common since clay pipe smoking ceased to be popular, and in more recent years it has been proved that occupational exposure to certain substances used in the dye trade caused an increased mortality from bladder cancer, and that elimination of the most dangerous substances, and more stringent safety precautions, have removed this hazard.

Cancer of the lung is, of course, far more serious from the point of view of the number of cases occurring annually than any of the above diseases have been, but a pointer to prevention has already been drawn. The fact that the evidence associating smoking, particularly heavy cigarette smoking with cancer is statistical, and that the actual causative agent in tobacco has not yet been identified in no way invalidates the conclusion that to reduce smoking will reduce the risk of cancer. Information on these lines has been available to the public since 1949. In spite of this, cigarette smoking has gone up by 3% each year since then, while the smoking of pipes and cigars, which is considered to be somewhat less dangerous has gone down annually. Obviously the problem is not to get the information to the people but that of knowing why people smoke. Generally speaking, the smoking habit starts in youth and it is certainly an anomaly that cheap cigarettes should be available to young men of the armed services.

In the belief that education as to the danger of smoking should be given to young people as early as possible, I have commenced giving talks to all the schools in which I carry out medical inspections, including in the talks other items of importance to health. Health education is a vital function of public health, but it appears from recent increases in knowledge that many of the preventive measures which will have to be advocated in the future will be those which will be unpopular with the general public. Perhaps this has always been so.

It is just over 100 years since the medical profession began to devote itself in an organised way to the prevention as well as the treatment of disease. The hazards to life and health in those days seem scarcely credible now. In this country between 1869 and 1883 no fewer than 23,700 deaths from typhus were recorded and in the summer of 1866 the number of deaths from cholera was 14,378, while the death rate in 1870 from enteric fever was 389 per million of the population.

The causes of this mortality were the filthy squalid and overcrowded conditions in which so many people lived, contaminated water supplies and the lack of treatment of sewage and

refuse. In their early days the medical officers of health had little time for consideration of matters other than these pressing problems and the measures which they recommended resulted in the elimination of cholera and typhus and reduction in the death rate from enteric fever by over half by the commencement of the twentieth century. Gradually, the doctors in the public health services began to concern themselves with man as a social creature. The personal health services, maternity and child welfare, school health services, tuberculosis services, etc., came into being. The field is still widening and each year the scope of preventive medicine appears to be wider while the destruction of human lives by bacteria diminishes. In spite of this changed emphasis, however, environmental hygiene continues to be of importance and this is perhaps particularly true of rural districts.

It is well to remember the great part which the Public Health Inspectors have played and are still playing in the control of unhygienic conditions in the material world in which we live. It is often not realised how much their work includes—from the supervision of food supplies, the remedying of defects in homes, shops and factories, to the supervision of disposal of waste products and the investigation of infectious diseases. New environmental problems continue to arise and need to be investigated. Examples are the possible danger to the health of bathers in the sea when sewage is being discharged, and the danger to young babies from having milk feeds made up from the water of shallow wells. The former problem is being considered on a National scale, but the latter will only be dealt with when shallow wells are replaced by mains water supplies. It has been estimated that about half the existing supplies of non-mains water in the county are unfit for infant feeding because of the high nitrate content which is liable to cause cyanosis—blue attacks—in babies, which can be fatal and usually require hospital treatment. Boiling the water does not eliminate the danger.

While there may be a risk of disease to bathers in the sea near to places where crude sewage is being discharged, the danger would appear to be greater in the Broads and rivers where there is no control over the discharge of waste matter from river craft and houseboats, unless it can be shown that a nuisance is being caused.

Another environmental problem is indiscriminate riverside development. How pleasant it seems to the outside observer on a summer day to be able to live in a caravan or simple hut at the water's edge, and how ungracious of an authority to prevent a young family with a housing problem or retired couple, from residing where and how they choose. But it is not always summer, nor the river water low, and if because of difficulty of access the

local authority cannot arrange those mundane but necessary things, the collection of waste products and refuse, they must go onto the land ; and with flooding of the river banks any germs in the waste matter may well be washed into the water supply. There may even be a danger to life from the river rising in this way, apart from the mist and damp conditions which are likely to ensue.

While it is true that danger to life from bacteria is probably diminishing each year, the danger to health is in some cases increasing. This applies particularly to bacteria which enter our food and if allowed to do so will multiply until they cause disease in those who consume the food (and incidentally a great deal of work to those who have to investigate and attempt to control the outbreaks).

The old idea of " ptomaine " poisoning has been abandoned and food poisoning is seldom due to any other cause than bacteria. The bacteria chiefly involved are staphylococci and the salmonella group. The former are found in septic cuts, boils, scratches, etc., and also in the noses of a good many people, particularly those who have " colds " or other infections. If transferred to food at the right temperature they multiply rapidly. The salmonella group live in the bowel and are passed in large numbers whenever the patient or " carrier " has the bowels opened. Thence they find their way to any food subsequently handled unless scrupulous attention to hygiene is observed. There is one simple act which if regularly observed would go very far towards eliminating food poisoning, and that is washing the hands after visiting the lavatory. It follows that proper facilities for washing should be available to all, particularly to food handlers—adequate and readily available water, soap and clean towels. This is the most important item, though in addition care should be observed not to cough or sneeze into food nor to touch it when there are septic places on the hands. To prevent the multiplication of germs in food it should not be allowed to stand in the warmth between meals. This applies particularly to " made up " meat dishes. Flies, rats and mice can also spread these germs and egg products have often been found contaminated. Duck eggs should not be eaten until they have been boiled for five minutes.

During 1956 three cases of food poisoning were notified but the actual number was probably greater as not all people seek medical advice when they have diarrhoea. All those notified were investigated but it was not possible to incriminate any particular article of diet. This is not surprising as unless notification is received very early, the remains of infected food is likely to have been destroyed. Fortunately all the cases were single ones and no spread occurred. It will be remembered that last year I reported that dysentery headed the list of notifiable infectious

diseases. This time the number has almost doubled. Though not a true food poisoning, being spread by direct contact usually and therefore particularly common in children, it also lives in the bowel, and hand washing is again the answer to the problem of its elimination.

Flies were mentioned briefly above, but they deserve special mention. They have been shown to carry bacteria and even the virus of poliomyelitis on their legs and in their intestines, and as is well known they will alight with equal readiness on excreta or human food. Their breeding places should be eliminated, they should be destroyed wherever possible and at all times kept away from food. The danger from flies is perhaps the greatest though not the only reason why adequate and proper lavatory accommodation should be available for all including the people who travel in such large and increasing numbers each year to the beaches and countryside of this district. It is not difficult to visualise what might happen if a carrier of enteric fever came to a place where the waste products were able to soak away into the surrounding land and where the water supply was from shallow wells. All the latter are liable to become contaminated and sooner or later the germs would enter the water supply. It is important that an adequate supply of safe drinking water should be available to all and this includes visitors to the inland waterways and the seaside.

During the year the first immunisations against poliomyelitis were carried out. The arrangements proceeded smoothly and no cases of serious reaction were reported in the area. The figures for immunisation against diphtheria and whooping cough and for vaccination against smallpox, details of which are given later in the report, show a welcome if not spectacular rise on those for the previous year.

Continued efforts to convince parents of the value of these measures is necessary both by individual persuasion and by propaganda on a wider scale.

I would like once more to express to the Chairman and Members of the Health Committee my appreciation of their continued support and to the Public Health Inspectors and clerical staff and all who work for and with the Health Department, my thanks for their efforts to maintain and improve the public health.

I have the honour to remain, Ladies and Gentlemen,

Your obedient Servant,

G. R. HOLTBY,

Medical Officer of Health.

25th September, 1957.

SECTION A.

NATURAL AND SOCIAL CONDITIONS.

Area—(in acres) 70,017. The administrative centre of the area is at Stalham with a surrounding district which is entirely rural in character, with Agriculture and Dairy Farming as the main industry. The district includes a large area of the Broad, 13 miles of coastline and many historical villages which attract many thousands of visitors during the holiday season.

Population. The Registrar-General has estimated the population for the mid-year 1956 as 17,980, giving a population density of .26 per acre.

Number of Inhabited Houses. According to the Rate Book, the number of Inhabited Houses in the district is 6,470, the Rateable Value being £141,059. The sum represented by a Penny Rate is £620 19s. 3d.

SUMMARY OF VITAL STATISTICS.

Area in acres	..	..	..	..	..	70,017
Population (Registrar-General's mid-June estimate)	..					17,980
No. of Inhabited Houses according to Rate Book	..					6,470
Rateable Value	..	..	..	..	..	£141,059
Sum represented by a Penny Rate	..	..				£620 19s. 3d.

			Total	Male	Female	<i>Rate per Thousand</i>	
						<i>Smallburgh</i>	<i>England & Wales</i>
Live Births—							
Legitimate	..	..	194	100	94	13.35	15.6
Illegitimate	..	..	13	7	6		
			<hr/>	<hr/>	<hr/>	(adjusted)	
			207	107	100		
Still Births—			<hr/>	<hr/>	<hr/>		
Legitimate	..	..	4	3	1	0.334	0.36
Illegitimate	..	..	2	2	—		
			<hr/>	<hr/>	<hr/>		
			6	5	1		
Deaths (all causes)			<hr/>	<hr/>	<hr/>		
..			173	96	77	8.65	11.7
						(adjusted)	

			Total	Male	Female	<i>Rate per Thousand</i>	
						<i>Live Births.</i>	
						<i>Smallburgh</i>	<i>England & Wales</i>
Infant Mortality—							
Legitimate	..	..	3	2	1	14.5	23.8
Illegitimate	..	..	—	—	—
			<hr/>	<hr/>	<hr/>		
			3	2	1		

Deaths from Special Diseases—							
Measles (all ages)	..	..	..	..	..	..	—
Whooping Cough (all ages)	..	..	..	..	..	..	—
Enteritis (under 2 years of age)	..	..	..	..	..	..	—
Cancer (all ages)	..	..	..	..	..	..	23
Tuberculosis (all ages)	..	..	..	..	..	..	1

**Birth Rate, Death Rate, Analysis of Mortality and Case Rates
Certain Diseases in the year 1956.**

							<i>England & Wales</i>	<i>Smallburgh R.D.C. (crude)</i>
							<i>Rates per 1,000 population</i>	
Births—								
Live	..	..	..	..	..	..	15.6	11.51
Still	..	..	..	..	..	..	0.36	0.334
							22.9 (a)	28.2 (a)
Deaths—								
All causes	..	..	..	..	..	..	11.7	9.62
Whooping Cough	..	..	..	..	..	..	0.00	0.00
Diphtheria	..	..	..	..	..	..	0.00	0.00
Tuberculosis	..	..	..	..	..	..	0.12	0.056
Influenza	..	..	..	..	..	..	0.06	0.056
Acute Poliomyelitis (including Polioencephalitis)	..	..	..	..	..	..	0.00	0.00
Pneumonia	..	..	..	..	..	..	0.52	0.11
Coronary Disease	..	..	..	..	..	..	1.67	1.72
Malignant Neoplasm Lung, Bronchus	..	..	..	..	..	..	0.41	0.28

Smallburgh R.D.C.

							<i>Rates per 1,000 population</i>	
Notifications (corrected)—								
Typhoid Fever	..	..	..	..	..	..	0.00	
Paratyphoid Fever	..	..	..	..	..	..	0.00	
Meningococcal Infection	..	..	..	..	..	..	0.00	
Scarlet Fever	..	..	..	..	..	..	0.55	
Whooping Cough	..	..	..	..	..	..	2.05	
Diphtheria	..	..	..	..	..	..	0.00	
Erysipelas	..	..	..	..	..	..	0.11	
Smallpox	..	..	..	..	..	..	0.00	
Measles	..	..	..	..	..	..	4.61	
Pneumonia	..	..	..	..	..	..	0.89	
Acute Poliomyelitis (including Polioencephalitis)	..	..	..	..	..	..	0.00	
Food Poisoning	..	..	..	..	..	..	0.16	
Puerperal Fever and Pyrexia	..	..	..	..	..	..	0.05	
Dysentery	..	..	..	..	..	..	3.61	

		<i>England & Wales</i>	<i>Smallburgh R.D.C.</i>
		<i>Rates per 1,000 Live Births</i>	
Deaths—			
All causes under 1 year of age	.. ..	23.8 (b)	14.5 (b)

(a) Per 1,000 Total (Live and Still) Births.

(b) Per 1,000 related Live Births.

Individual Causes of Death.

					<i>Male</i>	<i>Female</i>
Tuberculosis—respiratory	1	—				
Tuberculosis—other	—	—				
Syphilitic disease	—	—				
Diphtheria	—	—				
Whooping Cough	—	—				
Meningococcal infections	—	—				
Acute poliomyelitis	—	—				
Measles	—	—				
Other infective and parasitic diseases	—	—				
Malignant neoplasms of stomach	3	—				
Malignant neoplasm, lung, bronchus	5	—				
Malignant neoplasm of breast	—	—				
Malignant neoplasm of uterus	—	1				
Other malignant and lymphatic neoplasms	7	7				
Leukaemia, aleukaemia	—	—				
Diabetes	2	—				
Vascular lesions of nervous system	13	18				
Coronary disease—angina	20	11				
Hypertension with heart disease	3	4				
Other heart diseases	6	15				
Other circulatory diseases	6	3				
Influenza	1	—				
Pneumonia	—	2				
Bronchitis	5	3				
Other disease of respiratory system	1	3				
Ulcer of stomach and duodenum	3	1				
Gastritis, enteritis and diarrhoea	—	—				
Nephritis and nephrosis	2	—				
Hyperplasia of prostate	7	—				
Pregnancy, childbirth and abortion	—	—				
Congenital malformation	—	—				
Other defined and ill-defined diseases	3	5				
Motor vehicle accidents	2	—				
All other accidents	4	4				
Suicide	2	—				
Homicide and operations of war	—	—				
All causes					96	77

**Vital Statistics of the District for 1956 and previous Years.
Comparative Table with England and Wales for past 10 years.**

<i>Year</i>	<i>Live Birth Rate per 1,000 population</i>		<i>Death Rate per 1,000 population</i>		<i>Infant Mortality Rate per 1,000 Live Births</i>	
	<i>England & Wales</i>	<i>Smallburgh R.D.C. (crude)</i>	<i>England & Wales</i>	<i>Smallburgh R.D.C. (crude)</i>	<i>England & Wales</i>	<i>Smallburgh R.D.C.</i>
1947	20.5	21.45	12.0	12.41	41.0	31.3
1948	17.9	16.8	10.8	11.26	34.0	35.0
1949	16.7	17.9	11.7	14.56	32.0	39.7
1950	15.8	15.2	11.6	12.88	29.8	15.4
1951	15.5	15.1	12.5	12.8	29.4	32.1
1952	15.3	13.92	11.3	10.73	27.6	55.3*
1953	15.5	12.85	11.4	9.87	26.8	21.46
1954	15.2	14.12	11.3	9.80	25.5	19.38
1955	15.0	11.98	11.7	11.04	24.9	13.8
1956	15.6	11.51	11.7	9.62	23.8	14.5

* Exactly half of this figure was due to Prematurity.

SECTION B.

GENERAL PROVISIONS OF THE HEALTH SERVICES.

NATIONAL HEALTH SERVICE ACT, 1946.

Smallburgh Rural District is included with North Walsham Urban District and Blofield and Flegg Rural District to form No. 1 Area of the Norfolk County Council under the National Health Service Act for the purpose of carrying out duties for which the County Health Authority has accepted responsibility. The duties include Care of Mothers and Young Children, Midwifery Service, Health Visiting Service, Home Nursing Service, Ambulance Service, Vaccination and Immunisation, Prevention of Illness, Care and After-Care, Domestic Health Service and Mental Health Service. Some of these services, along with the School Service in the area, are the responsibility of the Area Medical Officer, who also acts as Medical Officer of Health of the three County Districts comprising Area No. 1 referred to above.

There are two Health Visitors and ten District Nurses with Centres established at the following places :—

Infant Welfare Centres.

Catfield	Village Hall ..	3rd Thursday each month.		
Felmingham ..	Village Hall ..	Last Tuesday ..	..	..
Hickling	Village Hall ..	1st Wednesday ..	..	..
Horning	Village Hall ..	3rd Monday ..	..	..
Scottow	Village Hall ..	1st Tuesday ..	..	..
Stalham	Church Room	3rd Wednesday ..	..	..
Worstead	Village Hall ..	1st Friday ..	..	..

Voluntary Weighing Centres.

Bacton	The Hall ..	2nd Friday ..	..	..
East Ruston ..	The Hall ..	2nd Thursday ..	..	..
Happisburgh ..	The Hall ..	2nd Tuesday ..	..	..
Scottow	R.A.F., Coltishall	1st Monday ..	..	..

A Doctor attends all Clinics where there is an attendance of 25 or over.

Other Treatment Centres.

A Centre is established at Stalham Secondary Modern School for :—

Dental Clinic	2 Sessions weekly.
Minor Ailments Clinic	2 .. monthly.
Speech Clinic	1 .. weekly.

General Welfare.

A Welfare Officer with established offices at Stalham and North Walsham, has maintained contact with the general public throughout the year.

Local village Old People's Welfare Committees have organised Old People's Clubs at Potter Heigham, Hickling, Bacton, Worstead, Swanton Abbot, Stalham, Felmingham, Sea Palling, Ludham, Hoveton, Smallburgh and Dilham and these prove a useful medium by which the Welfare Officer can maintain contact with the aged residents of each village. The Welfare Officer is anxious to see such Clubs established in all the villages in the area and he is only too willing to give assistance to this end.

Contact has been regularly maintained during the year with the Smallburgh Rural District Council Officers and especially with the Clerk, Public Health Inspector and Rent Collector. By working together it has often been possible to effect very satisfactory results, especially with threatened eviction cases. It has not been necessary to provide residential accommodation under Part III of the National Assistance Act for evicted families during the year.

The average number of cases assisted each week under the Norfolk County Council's Home Help Scheme was 19 and other cases have been given domestic assistance by arrangement with the National Assistance Board. The number of persons admitted to Chronic Sick Hospitals and County Homes was 30. The Welfare Officer is also the Duly Authorised Officer under the Lunacy Acts and the Mental Deficiency Acts and in this capacity he has made numerous domiciliary visits to mental defectives living in the community and to patients discharged from, or on leave from, mental hospitals.

Ambulance Service.

This service is operated by the St. John Ambulance Brigade and British Red Cross Society as Agents of the County Council.

Vaccination and Immunisation.

This service is also the responsibility of the County Health Authority and is carried out by General Practitioners and by Assistant County Medical Officers.

Laboratory Facilities.

Facilities for Laboratory investigation are to be had at the Public Health Laboratory, Bowthorpe Road, Norwich, who are the suppliers of lymph for vaccination.

National Assistance (1948) Act, Section 47. (Removal to suitable premises of persons in need of care and attention).

No action was necessary during the year.

SECTION C.

SANITARY CONDITIONS OF THE DISTRICT.

(Contributed by the Senior Public Health Inspector).

Water Supply.

The sources of public water supply in the district again received very close supervision, particularly the supply from the Catfield headworks which was sampled for bacteriological examination twice weekly throughout the year.

124 samples in all were taken from various sections of the public mains and only very minor trouble was found in 5 instances probably from extraneous contamination.

26 of the 62 samples of water submitted for examination from private supplies were found to be unsatisfactory, many with gross contamination, and it does once again stress the necessity with the heavy influx of visitors in the summer for obtaining as wide a distribution as possible of a safe mains supply for all, in order that the possibility of water-borne epidemics may be reduced to a minimum.

The results of the 186 samples taken can be summarised as follows :—

Result.	<i>Chemical Examination</i>		<i>Bacteriological Examination</i>	
	<i>Private Supply</i>	<i>Public Supply</i>	<i>Private Supply</i>	<i>Public Supply</i>
Satisfactory ..	—	5	36	114
Unsatisfactory ..	—	—	26	5

During 1956 the new mains laid in 1955 in the Norwich City Statutory area, and the bulk supply areas of Dilham, Swanton Abbot and Worstead were brought more fully into use. By the end of the year the free connections contract for these three latter parishes was nearly complete.

In October the new headworks at Catfield was opened by the Chairman of the Council in the presence of members and officials of the Smallburgh and Blofield and Flegg Rural District Councils. This brought the new mains at Catfield, Ludham and Potter Heigham into full use and by the end of the year much progress had been made with the free connections contract for these parishes. Blofield and Flegg Rural District Council did not, during 1956, take any large quantity of water in bulk from the Potter Heigham main at the railway bridge, as the main laying scheme in the adjacent parishes was not complete.

Work on the provision of mains water supply in the northern parishes went well ahead during 1956, and by December the second bore at East Ruston had been sunk, practically all mains in Stage 1 of the scheme laid, and good progress made with the construction of the headworks building at East Ruston, the booster house at Bacton and the reinforced concrete water towers at Happisburgh and Knapton.

At 31st December, 1956, and not taking into account the mains laid under the Area 'A' scheme for the northern parishes, there were approximately 73 miles of mains in use in the rural district, 30 miles being in the Norwich Statutory area and 43 miles in the remainder of the district.

In considering the information given on water supplies in the Table below, it should be noted that the parishes mentioned are not completely covered by mains and in consequence many properties off route cannot take a public supply of water.

The information relating to the Norwich City Statutory area has been kindly supplied by the City Waterworks Engineer and Manager.

Parishes served	Estimated number of occupied properties.	Estimated population.	Number of properties with direct supply.	Number of standpipes.	Number of metered supplies.	Number of schools supplied.
NORWICH CITY STATUTORY AREA						
ASHMANHAUGH ..	53	153	14	—	1	—
HORNING	286	813	180	—	20	1
HOVETON	532	1445	360	—	30	1
NEATISHEAD ..	174	460	60	—	1	1
SCOTTOW	220	1376	154	—	3	—
SLOLEY	72	216	23	—	—	—
SMALLBURGH ..	135	406	38	—	5	1
TUNSTEAD	159	497	66	—	13	1
BULK SUPPLY AREAS						
DILHAM	111	328	34	—	1	1
SWANTON ABBOT ..	132	340	61	—	12	—
WORSTEAD	262	740	92	—	6	1

† Excluding Building and temporary supplies.

Parishes served	Estimated number of occupied properties.	Estimated population.	Number of Properties with direct supply.	Number of standpipes.	Number of metered supplies.	Number of schools supplied.
CATFIELD SUPPLY AREA						
CATFIELD	224	680	115	—	25 [†]	1
HICKLING	276	800	177	—	16	1
INGHAM	131	390	71	—	14	1
LUDHAM	321	980	47	—	4	1
POTTER HEIGHAM ..	255	696	24	—	1	1
SEA PALLING	235	478	142	1*	17	1
STALHAM.. ..	444	1232	387	19	30	2
SUTTON	162	470	72	—	14	1
PARISH SCHEME						
HONING	116	329	35	—	3 [†]	1

* Public Drinking Fountain.

† Excluding Building and temporary supplies.

Sewerage.

Stalham is still the only village in the rural district which is publicly sewered, although there are in addition 18 small plants taking sewage from 20 Council housing estates in various parts of the district.

During the year the Council endorsed its previous decision that all small estate schemes wherever practicable, should in future be planned to form part of ultimate village schemes. Schemes on these lines were in course of preparation for Sutton and Swanton Abbot at the end of the year, with a scheme for Hickling to follow.

Little further progress was made during the year on the scheme so urgently required for Hoveton.

Collection and Disposal of Refuse.

The amended system of refuse collection commenced in April, 1954 and described in previous Annual Reports, was continued satisfactorily throughout the major part of the year until the introduction of petrol rationing in December, when the weekly

collection of refuse in the parishes of Hoveton, Horning, Ludham, Potter Heigham and Stalham, was replaced by a fortnightly collection.

Cesspool emptying again increased, and during 1956 approximately 1,500,000 gallons of liquid were removed in 2,025 loads. The details for the year, with the figures for 1955 in brackets, are given below :—

	<i>No. of Cesspools Emptied</i>	<i>No. of Loads Removed</i>	<i>No. of Loads Chargeable</i>
Private	568 (576)	757 (813)	448 (489)
Council	411 (290)	1,268 (1,048)	1,215 (996)
Total	979 (866)	2,025 (1,861)	1,663 (1,485)

Full co-operation of certain farmers was again received in the disposal of cesspool and nightsoil liquid to the land and to straw lagoons, but extreme difficulties did arise at times of wet weather and late spring, in finding suitable disposal points and frequently long hauls were necessary.

Very heavy summer time collections of refuse from the coast and rivers and Broads must again be reported, and this resulted in much extra work with twice weekly collections outside the normal scheme from many boatyards and mooring points where refuse bins had been provided. Additional bins and collection points were provided when found necessary.

The use of the Fordson Major tractor purchased in 1954, kept the tips referred to in the Report for 1954 in good condition.

The labour strength of 14 men remained the same as in 1955, but one of the cesspool emptiers was replaced by a Karrier diesel vehicle in December. Details of the vehicles in use are as follows:—

- 1, 1,000 gallon cesspool emptier with nightsoil attachment (diesel).
- 2, 700 gallon cesspool emptiers with nightsoil attachments (petrol).
- 5, 10 cubic yard refuse collection vehicles (petrol).

- 1, 7 cubic yard refuse collection vehicle (emergency use only)
(petrol).
- 1, 10 cubic yard refuse trailer.
- 1, Fordson Major tractor. (diesel)

7,869 gallons of petrol and diesel oil were used by the Council's vehicles during the year in travelling 49,817 miles in the collection and disposal of all types of refuse.

Complaints and Nuisances.

43 complaints were received during the year ; of these 27 were found to be justified and appropriate action was taken to secure abatement of the unsatisfactory conditions found. In only 2 instances was it necessary to take formal action to secure the abatement of a nuisance.

PREVENTION OF DAMAGE BY PESTS ACT, 1949.

The full-time rat catcher employed by the Council had a very full year as will be seen from the details given below. The up-to-date methods of poisons used, as advised by the Ministry of Agriculture Fisheries & Food, were Warfarin, Zinc Phosphide and Arsenic. In addition to dealing with complaints of rat and mice infestation, routine inspection of dwelling houses, shops, factories and agricultural holdings were carried out and regular treatment visits to the refuse tips and sewage disposal works were made.

The particulars of the year's work are as follows :—

Number of properties inspected during the year ..	1,177
Number of properties found to be infested ..	785
Number of pre-baits laid	16,487
Number of poison baits laid	10,601
Number of dead rats found and destroyed ..	2,022
Number of dead mice found and destroyed ..	446
Total number of visits by the operator	4,182

Payments made to the Local Authority for the
services of the operative at business properties £16 11 0

THE CONTROL OF CAMPING AND OF MOVEABLE DWELLINGS.

During 1956 there were 17 licensed sites in use within the district for stationing 230 dwellings, together with 39 licensed plots for single caravans.

These figures show a slight increase over those for 1955, but do not give a very true picture of the position with regard to camping, as many plots of land used for short periods only and Club sites, are not subject to control under the provisions of the Public Health Act, 1936.

STORAGE OF PETROLEUM SPIRIT.

£78 15s. 0d. was received in fees for the 138 licences issued during 1956, in respect of the storage of 83,001 gallons of petroleum spirit. As in the past, all licensed premises storing petroleum were visited at least once during the year.

SECTION D. HOUSING.

(Contributed by the Senior Public Health Inspector).

Reasonable progress was made during the year with the representation, closure and demolition of the unfit houses included in the Council's five-year programme.

At 31st December it was estimated that there were about 300 totally unfit dwellings in the district of which 251 were the subject of Undertakings or Demolition or Closing Orders ; 126 of the total unfit dwellings being still occupied. Unfortunately many further properties are continuing to deteriorate through lack of repairs which landlords are unable to carry out with the present rent return, and it is anticipated that the above figures will, in consequence, increase over the next few years.

Improvement Grants to a certain extent encourage landlords and help to keep some properties in use. 40 out of 43 applications for Improvement Grants received the approval of the Council for works costing £25,468 0s. 0d. with Grants of 50% in each case not exceeding the maximum of £400 0s. 0d., to a total sum of £10,995 0s. 0d.

No applications for Certificates of Disrepair were received during the year.

A summary of the year's work relating to unfit properties is as follows :—

(1) Inspection of Dwelling-houses during the year.

1. (a)	Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts)	244
(b)	Number of inspections made for the purpose..	368
2. (a)	Number of dwelling-houses (included under sub-head 1 above) which were inspected and recorded under the Housing Consolidated Regulations, 1925 and 1932	26
(b)	Number of inspections made for the purpose..	44
3.	Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	26
4.	Number of dwelling-houses (exclusive of those referred to under the preceding sub-head) found not to be fit in all respects for human habitation	106

(2) Remedy of Defects during the year without service of Formal Notice.

	Number of defective dwelling-houses rendered fit in consequence of informal action by the local authority or their officers	95
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(3) Action under statutory powers during the year.

A. Proceedings under Sections 9, 10, 11 and 16 of the Housing Act, 1936.

1.	Number of dwelling-houses in respect of which notices were served requiring repairs	11
2.	Number of dwelling-houses which were rendered fit after service of formal notices—	
(a)	By Owners	11
(b)	By local authority in default of Owners	Nil

B. Proceedings under Public Health Acts.

1.	Number of dwelling-houses in respect of which notices were served requiring defects to be remedied	Nil
2.	Number of dwelling-houses in which defects were remedied after service of formal notices—	
(a)	By Owners	Nil
(b)	By local authority in default of Owners	Nil

C. Proceedings under Sections 11 and 13 of the Housing Act, 1936.

1. Number of dwelling-houses in respect of which Demolition Orders were made	13
2. Number of dwelling-houses demolished in pursuance of Demolition Orders	19
3. Number of written undertakings accepted ..	2

D. Proceedings under Section 12 of the Housing Act, 1936.

1. Number of separate tenements or underground rooms in respect of which Closing Orders were made	1
2. Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit	<i>Nil</i>

E. Proceedings under Section 25 of the Housing Act, 1936.

1. Number of houses in confirmed clearance areas demolished	<i>Nil</i>
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F. Proceedings under Housing Act, 1949.

1. Closing Orders made under Section 3 (1) ..	<i>Nil</i>
2. Demolition Orders determined and Closing Orders substituted under Section 3 (2) ..	<i>Nil</i>

G. Proceedings under Local Government (Miscellaneous Provisions) Act, 1953.

1. Closing Orders made under Section 10 (1) ..	9
--	---

(4) Overcrowding—Part IV Housing Act, 1936.

No action was taken under this Part during the year.

22 new Council dwellings were completed and occupied during 1956, bringing the number of properties owned by the Council up to 1,317, as follows :—

1919 Assisted Scheme	48
1923 Acts	6
1924 Acts	412
1931 (Rural Authorities) Act	28
Slum Clearance	58
1936 Act (Overcrowding)	34
1938 Act (Overcrowding and Slum Clearance)	3
(Accommodation of members of aggregate population) ..	19
Not subsidised	83
1946 Act (a) Permanent	576
(b) Aluminium Bungalows	50
	<hr/>
	1,317

SECTION E.

INSPECTION AND SUPERVISION OF FOOD.

(Contributed by the Senior Public Health Inspector).

Food Premises.

The Food Hygiene Regulations, 1955, made under the provisions of the Food & Drugs Act, 1955, came into operation with minor exceptions, on 1st January, 1956. Far reaching in their application, these Regulations call for a high standard of cleanliness and structural conditions at food premises. All the proprietors of food premises were circularised with leaflets and posters to draw the attention of all food handlers to the provisions of the Act and Regulations.

Much work in this field remains to be done, but the majority of all premises were visited during the year, and numerous structural improvements obtained. 203 visits were made under the provisions of the Regulations.

The food premises in use within the district during 1956, may be broadly classified as follows :—

Bakeries and Bakers' Shops	..	6
Butchers' Shops	.. ..	12
Cafes and Restaurants	..	12
Fish Shops	.. ..	7
Grocers and General Stores	..	94
Licensed Premises	.. ..	60

Milk Supply.

The control of the production of milk supplies is in the hands of the Ministry of Agriculture, Fisheries and Food, and Local Authorities only play a comparatively minor role on the retail side. At the end of the year there were on the register for the Smallburgh Rural District, 24 distributors of milk of whom 6 operated from outside the district. Of these, 17 were licensed to sell Tuberculin Tested and Pasteurised milk and 7 to sell Tuberculin Tested milk only.

No Stop Notices were placed on any supply of milk within the district during 1956.

Ice Cream.

58 premises were registered for the storage and sale of ice cream, which is all pre-packed and received from reputable manufacturers. Only one premises is registered for the manufacture of this type of food. 77 visits in all were made to retail ice cream premises.

Preserved Foods.

12 premises are registered under the Food and Drugs Act for the preparation and manufacture of preserved foods, of various kinds. 35 visits in all were made to this type of registered premises.

Meat and Food Inspection.

(a) Slaughter Houses.

During 1956, 8,279 animals were killed in the 5 slaughter houses in regular use, and all the resulting carcasses and offals were inspected during the course of 1,061 visits. Approximately one third of these visits were made outside normal office hours, many during the late evenings and on Sundays.

Summarised details of the inspections carried out are given in the following table, from which it will be seen that the quality of meat passing through the slaughter-houses was very high. Only 87 cwt. 106 lbs. of meat and offal was found unfit for human consumption. This unsound meat and offal was, in the majority of instances, after staining, collected by a reputable firm from another area for processing and manufacture into animal foods and fertilizers. Small amounts of condemned meat from the smaller slaughter-houses are collected and buried under supervision, on one or other of the Council's refuse tips.

There were 15 slaughtermen licensed by the Council and operating in the district at 31st December, 1956.

Carcasses and Offal Inspected and Condemned in whole or in part.

	<i>Cattle (excluding Cows)</i>	<i>Cows</i>	<i>Calves</i>	<i>Sheep and Lambs</i>	<i>Pigs</i>	<i>Horses</i>
Number killed (if known)	2212	4	109	1679	4275	—
Number Inspected	2212	4	109	1679	4275	—
All Diseases except Tuberculosis and Cysticerci.						
Whole carcasses condemned	1	—	—	—	4	—
Carcasses of which some part or organ was con- demned	574	—	—	2	70	—
Percentage of number in- spected affected with diseases other than Tuberculosis and Cy- sticerci	25.9%	—	—	0.12%	1.73%	—

	<i>Cattle (excluding Cows)</i>	<i>Cows</i>	<i>Calves</i>	<i>Sheep and Lambs</i>	<i>Pigs</i>	<i>Horses</i>
Tuberculosis only :						
Whole carcasses condemned	—	—	—	—	2	—
Carcases of which some part or organ was con- demned	119	1	—	—	35	—
Percentage of number in- spected affected with Tuberculosis	5.38%	25.0%	—	—	0.86%	—
Cysticercosis						
Carcases of which some part or organ was con- demned	5	—	—	—	—	—
Carcases submitted to treatment by refrig- eration	5	—	—	—	—	—
Generalised and totally condemned	—	—	—	—	—	—

(b) Other Foods.

No large stocks of other foods were found unfit for human consumption during the year, and the 422 cans of various types declared unsatisfactory were buried on one or other of the Council's refuse tips.

SECTION F.

PREVENTION OF AND CONTROL OF INFECTIOUS DISEASE AND OTHER DISEASES.

Notifications (Corrected).

	<i>No.</i>		<i>No.</i>
Scarlet Fever	10	Erysipelas	2
Whooping Cough	37	Food Poisoning	3
Measles	83	Infective Hepatitis	4
Acute Pneumonia	16	Puerperal Pyrexia	1
Dysentery	65		

DIPHTHERIA IMMUNISATION.
(for whole of No. 1 Area)

Age at 31/12/56 (i.e., born in year)	Under 1 yr. (1956)	1-4 years (1955-1952)	5-14 years (1951-1942)
No. Immunised—			
(a) Primary (59%) *	390	132	193
(b) Reinforcement	—	44	667
Total—	Children under 5 years ..		522
(a)	Children under 15 years ..		715
(b)	All Ages		711

* Smallburgh R.D. 133 = 64%

VACCINATION AGAINST SMALLPOX.
(for whole of No. 1 area)

Age at 31/12/56 (i.e., born in year)	Under 1 yr. 1956	1-4 years 1951-1952	5-14 years 1951-1942	15 years and over
No. Vaccinated (58%)	*387	34	17	19
No. Re-vaccinated ..	—	5	17	62

* Smallburgh R.D. 137 = 66%

POLIOMYELITIS VACCINATION, 1956.

District	Eligible for Vaccination (1947-54).	No. accepted *	% accepted	No. vaccinated
Blofield and Flegg R.D.	3,720	985	26	100
Smallburgh R.D.	1,415	584	41	53
North Walsham U.D.	482	277	57	14
TOTAL AREA 1	5,617	1,846	33	167

* Only 9% of acceptances were vaccinated owing to limited supply of vaccine. The remainder of children registered in 1956 will be vaccinated by Autumn, 1957.

TUBERCULOSIS.

The following are the Mortality Rates :—

Pulmonary Tuberculosis Mortality Rate 0.055 per 1,000 pop.

Non-pulmonary „ „ „ 0.00 „

Number of Cases of Tuberculosis on Register at 31st December, 1956, and December, 1955.

	<i>Pulmonary</i>		<i>Non-Pulmonary</i>		<i>Total</i>	
	<i>Males</i>	<i>Fem.</i>	<i>Males</i>	<i>Fem.</i>	<i>Males</i>	<i>Fem.</i>
31st December, 1955	32	36	16	16	48	52
31st December, 1956	31	36	18	17	49	53

Comparative Figures for the Notification of Tuberculosis.

PULMONARY TUBERCULOSIS.

Notifications.

<i>Ages</i>	1956		1955		1954	
	<i>Males</i>	<i>Fem.</i>	<i>Males</i>	<i>Fem.</i>	<i>Males</i>	<i>Fem.</i>
0- 1 year	—	—	—	—	—	—
1- 5 years	—	—	—	—	1	—
5-10 „	—	—	—	—	1	—
10-15 „	—	—	—	—	—	1
15-20 „	—	—	—	1	—	—
20-25 „	1	—	—	2	—	—
25-35 „	—	—	1	—	—	1
35-45 „	—	—	1	—	1	2
45-65 „	1	—	1	1	3	—
Over 65 years ..	—	—	—	—	—	—
Totals ..	2	—	3	4	6	4

NON-PULMONARY TUBERCULOSIS.

Notifications.

<i>Ages</i>	1956		1955		1954	
	<i>Males</i>	<i>Fem.</i>	<i>Males</i>	<i>Fem.</i>	<i>Males</i>	<i>Fem.</i>
0- 1 year	-	-	-	-	-	-
1- 5 years	-	-	-	-	-	-
5-10 "	1	-	-	-	-	-
10-15 "	-	-	-	-	-	-
15-20 "	-	1	-	-	-	-
20-25 "	-	-	-	-	-	1
25-35 "	-	-	-	-	1	-
35-45 "	-	-	-	1	-	-
45-65 "	-	-	1	-	-	-
Over 65 years ..	-	-	-	-	-	-
Totals ..	1	1	1	1	1	1

INFECTIOUS DISEASES.

Measles.

With 83 cases this disease headed the list of notified infectious diseases during the year. As has been observed previously this disease has a high incidence every alternate year as the number of susceptible children increase to a level at which an outbreak can occur.

Dysentery.

65 cases were notified, compared with 39 during the previous year. This probably does not represent the total number of cases, and in any event is sufficiently large to indicate the size of the problem.

Whooping Cough.

37 cases were notified, as against 13 last year. In spite of this increase, immunisation against the disease, combined with that against diphtheria, appears to be giving favourable results in that even if not prevented, the disease is usually less severe in the immunised child.

Scarlet Fever.

With 10 cases this disease showed a slight rise on the previous year, and together with a few small outbreaks of streptococcal

sore throat gave some trouble in compact communities, where it tended to spread rather easily from one case to another. Fortunately, modern methods of treatment are generally satisfactory, although the dangers of provocation of rheumatic fever and of kidney complications still exist.

Infective Hepatitis.

The notifications of this troublesome complaint show a welcome reduction from 13 in 1955 to 4 this year.

Tuberculosis.

2 cases of pulmonary and 2 of non-pulmonary disease were notified. This is a slight drop on the previous year. It is planned at a later date to carry out B.C.G. vaccination on all school leavers in the area. With modern methods of treatment and control the danger to life in this disease has greatly decreased, but correspondingly the problems of rehabilitation of the tuberculous are increasing. A sympathetic and understanding but at the same time unsentimental attitude is necessary for all who come into contact with ex-patients. The most important thing is that they should be enabled to earn a living for themselves.

Poliomyelitis.

No cases of this disease were reported during 1956.

FACTORIES ACTS, 1937 AND 1948.

PART I OF THE ACT.

1.—**Inspections** for purposes of provisions as to health (including inspections made by Public Health Inspectors).

Premises	M/c. line No.	Number on Register	Number of			M/c line No.
			Inspections	Written notices	Occupiers prosecuted	
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	1	73	14	—	—	1
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	2	22	9	—	—	2
(iii) Other Premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises)	3	10	6	—	—	3
Total		105	29	—	—	

2.—Cases in which Defects were found—

(If defects are discovered at the premises on two, three or more separate occasions they should be reckoned as two, three or more "cases").

Particulars	M/c. line No.	Number of cases in which defects were found				Number of cases in which prose- cutions were instituted	M/c. line No.
		Found	Remedied	Referred			
To H.M. Inspector	By H.M. Inspector						
Want of cleanliness (S.1)	4	—	—	—	—	—	4
Overcrowding (S.2)	5	—	—	—	—	—	5
Unreasonable temperature (S.3)	6	—	—	—	—	—	6
Inadequate ventilation (S.4)	7	—	—	—	—	—	7
Ineffective drainage of floors (S.6)	8	—	—	—	—	—	8
Sanitary Conveniences (S.7)							
(a) Insufficient	9	1	1	—	—	—	9
(b) Unsuitable or defec- tive	10	—	—	—	—	—	10
(c) Not separate for sexes	11	1	1	—	—	—	11
Other offences against the Act (not including offences relating to Out- work)	12	—	—	—	—	—	12
Total	60	2	2	—	—	—	60

